EXHIBIT B

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Duke University Medical Center

CURRICULUM VITAE

for

Permanent Record

and the

Appointments and Promotions Committee

Date prepared: September 2006

Name: David Harold Harpole, Jr., M.D.

Primary Academic Appointment: Division of Thoracic Surgery, Department of Surgery.

Secondary Appointment: Department of Pathology

Social Security Number: 229-64-7013

Present Academic Rank and Title: Professor of Surgery with Tenure Associate Professor of Pathology

Date and rank of first Duke Faculty appointment: April 1, 1996

Medical Licensure:

1985

1985

Diplomat, National Board of Medical Examiners No. 301073 Board of Medical Examiners State of North Carolina No. 29585

1993

Massachusetts Board of Registration in Medicine No. 77515 (Inactive)

Specialty Certification and Dates:

1993

American Board of Surgery No. 38463,

Re-certified 2002

1994

American Board of Thoracic Surgery No. 5468,

Re-certified 2003

Date of birth: April 5, 1958

Place: New Orleans, LA

Citizen of:

United States of America

Spouse:

Linda H. Harpole, M.D., M.P.H.

Children:

Lauren Rebecca (8/6/99), Sydney Catherine (10/29/01), Caroline Dana (10/29/01)

Education:

Place

Dafe Degree

High School:

North Cross School

6/76 Diploma

Roznoke, VA.

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25. Meyerson SL, Harpole DH. Bronchial gland tumors. In Pearson FG, Cooper JD, Deslauriers J, et al (eds): Thoracid Surgery 3rd edition. New York, NY, Churchill Livingstone, in press,

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- 26 Onaitis M., Harpole DH., Jr., Mediastinoscopy. In Mastery of Thoracic Surgery, Kaiser L. ed., Elsevier Saunders, Philadelphia 2006.
- 27. Posther KE, Harpole DH, Jr. The Surgical Management of Lung Cancer. In Seminars of Oncology, 2005
- 28. Meyerson SL, Harpole DH. Surgical treatment of bronchopleural fistula after pneumonectomy. In Sugarbaker DJ, Bueno R, Zellos L (eds): Adult Chest Surgery: Concepts and Procedures. New York, NY, The McGraw Hill Companies, in press.
- 29. Burfeind WR, Jr., Harpole DH, Jr. Surgical Strategies and Outcomes after Induction Therapy for Non-Small Cell Lung Cancer. In Semmars of Cardiothoracic Surgery, 2005
- Meyerson SL, Harpole DH. Induction therapy for stage IIIA (N2) lung cancer. In 30. Ferguson MK. (ed): Difficult Decisions in Thoracic Surgery: An Evidence-Based Approach. Guildford, UK, Springer Verlag London Ltd, in press.
- 31. Meyerson SL, Harpole DH, Jr. Lung Cancer Staging, Proteomics. Thoracic Surgery Clinics of North America. Thomas D'Amico editor., 2006
- 32. Petersen RP, Harpole DH, Jr., Mölecular Prognostic Markers in Stage I Non-small Cell Lung Cancer. Thoracic Surgery Chrics of North America, Rodney Landreneau editor, 2006

4. Books:

Management of Non-Small Cell Lung Cancer. Roy Herbst, MD, David H. Harpole, Jr. MD, Mark A. Socinski, MD: In preparation

5. Other:

a. Published Scientific Reviews Diagnosis and Management of Lung Cancer: ACCP Evidence-based Guideline. CHEST 123: Is-388S, 2003

b. Selected Abstracts:

- 1. Harpole DH Jr, Skelton TN, Davidson CJ, Jones RH, Bashore TM. Validation of left ventricular stroke work measured by digital subtraction angiography and first-pass radionuclide angiocardiography in patients with acrtic stenosis. Clin Res 1988; 36:282a.
- Harpole DH Jr, Skelton TN, Davidson CJ, Jones RH, Bashore TM. The acute effects of 2. balloon aortic valvuloplasty on ventricular performance. Circulation 1987, 76 Suppl

IV:495.

- Harpole DH Jr, Jones RH, Bashore TM. Serial evaluation of left ventricular function 3. after aortic valvuloplasty utilizing first-pass radionuclide angiocardiography. Circulation 1987; 76 Suppl IV: 522.
- Davidson CJ, Harpole DH Jr, Skelton TN, Kisslo KB, Kisslo JA, Jones RH, Bashore TM. 4. The early rise in the aortic gradient following aortic valvuloplasty is due to improved left ventricular performance. J Am Coll Cardiol 1988; 11:220a.
- Harpole DH Jr., Wolfe WG, Rankin JS, Clements FM, Jones RH. Efficacy of crystalloid 5. cardioplegia during cardiac valvular operations. Circulation 1988; 78 Suppl II:185.
- Harpole DH Jr, Skelfon TN, Jones RH. Systolic performance using radionuclide 6. angiography and micromanometer pressure at baseline and six months after aortic valvuloplasty. Circulation 1988; 78 Suppl II:530.
- 7 Harpole DH Jr, Rankin JS, Wolfe WG, Jones RH. Changes in left ventricular systolic load immediately following valve replacement. Circulation 1989, 80 Suppl II:424.
- Gall SA, Harpole DH Ir, Rankin JS, Glower DD, Jones RH. Intrinsic myocardial 8. performance in volume versus pressure overload hypertrophy during prosthetic valve replacement. Circulation 1990; 82 Suppl III:776.
- Kearney D, Harpole DH Jr, Wormuth D, DeCamp M, Mentzer S, Strauss G, Healey, 9. Mayer R., Sugarbaker D. A multimodal approach to esophageal cancer. Proc Am Soc Clin Oncol, 1994.
- 10. DeCamp, M., Jaklitsch MT, Harpole DH Jr, Mentzer SI, Sugarbaker DJ. An improved videothorascopic technique proves superior to axillary thoracotomy in the surgical management of spontaneous pneumothorax. Am J Respir Crit Care Med 1994; 149 (4 pt 2):A511.
- ĬĬ. Harpole DH Jr, DeCamp MM Jr, Mentzer SJ, Reilly JJ Jr, O'Donnell W, Sugarbaker DJ. A prospective analysis of dysdiythmias after pneumonectomy. Am J Respir Crit Care Med 1994; 149(4 pt 2):A507.
- Jaklitsch MT, Harpole DH Jr, DeCamp MM, Mentzer SJ, Reilly JJ, O'Donnell WJ, 12. Sugarbaker DJ. Video-assisted thoracic surgery reduces expected operative montality in the elderly. Am J Respir Crit Care Med 1994; 149(4 pt 2):A510.
- Wormuth DW, Reilly JJ, Mentzer SJ, O'Domaell WJ, Harpole DH Jr, DeCamp MM, 13. Sugarbaker DI. Frequent isolation of oral flora from the distal tracheo-bronchial tree of hing transplant patients with post-transplant pneumonia. Am J Respir Crit Care Med 1994; 149(4 pt 2): A739.

- Harpole DH Jr, Sleckman BG, Strauss, GM, Sugarbaker DJ. Multimodality therapy for 14. chest wall invesive lung cancer. Proc Society of Surgical Oncology 47:31, 1994
- 15. DeCamp MM Jr, Jaklitsch MT, Mentzer SJ, Harpole DH Jr, Sugarbaker DJ. The safety and versatility of video-thoracoscopy: a prospective analysis of 516 cases. The Plenary Session of the American College of Surgeons, Chicago, IL, 1994.
- Sugarbaker DJ, Jaklitsch MT, DeCamp MM Jr, Harpole DH Jr, Swanson S. Safety of 16. video-assisted thoracic surgery (VATS): prospective analysis of 626 cases. The Second Buropean Conference on Thoracle Malignancies 1994, Siena, Italy.
- DeCamp MM, Roberts JR, Jakitsch MT, Harpole DH Jr, Mentzer SJ, Swanson SJ, 17. Sugarbaker DJ. Thoracoscopy is safe and effective in the management of malignant pericardial tamponade. Proc Sockety of Surgical Oncology 48: 23, 1995.
- Healey EA, Recht A, Mentzer SJ, Strauss GM, Harpole DH Jr, DeCarup MM, Swanson 18. SJ, Sugarbaker DJ. Patterns of failure following planned tri-modality therapy for malignant mesothelioma. Proc Society of Surgical Oncology 48: 25, 1995,
- Swanson, SI, Harpole DH Jr, Decamp MM, Healey EA, Mentzer SI, Wormuth D, 19. Stranss CM, Sugarbaker DJ. Feasibility of intrapericardial pneumonectomy for lung cancer following induction therapy. Proc Am Soc Clin Oncol, 1995.
- 20. Sugarbaker DI, Harpole DH Jr, Healey EA, DeCamp MM, Menizer SJ, Liptay MJ, Strauss G, Swanson SI, Antman K, Multimodality treatment of malignant plenral mesothelioma, results in 94 consecutive patients. Proc Am Sec Clin Oncol, 1995.
- Harpole DH Jr, Amos AM, Alexander E, Loeffler J, Swanson SJ, DeCamp MM, Mentzer 21. SJ, Skarin A, Richards WR, Black P, Sugarbaker DJ. Stage of the primary is important When treating isolated brain metastases from lung cancer Proc Am Soc Clin Oncol, 1996.
- Kwiatkowski DJ, Harpole DH Jr, Godleski J, Shieh D, Blanco R, Richards W, Herndon J, 22. Strauss G, Sugarbaker DJ. Prognostic factor analysis of 250 Stage I NSCLO Patients: Pathologie features are more important than molecular analyses Proc Am Soc Clin Oncol, 1997,
- DeCamp MM, Strauss GM, Kwiatkowski DJ, Harpole DH Jr, Godleski J, Shieh D, 23. Blanco R, Richards W, Flerndon J, Sugarbaker DJ. Gender Predicts Survival in Stage I NSCLC: Clinico-pathologic and molecular analysis of 250 patients. 8th World Conference on Lung Cancer 1998.
- Harpole DH Ir, Moore MH, Alois TA, Sporn TA, Conlon DH, Wolfe WG, and D'Amico 24. TA. Molecular markers of treatment resistance or sensitivity in esophageal cancer patients, Proc Am Soc Clin Oncol, 1999.
- Aloia TA, Moore MH, D'Amico TA, Hara M, Herndon EF, Patz EF, Harpole DH Jr. 25.

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- Positron emmission tomography SUR score correlates with the presence of glucose transporters in non-small cell lung cancer tumors. Proc Am Soc Clin Oncol, 1999.
- Aloia TA, Moore MB, Conlon D, Harpole DH Jr, D'Amico TA. Expression of 26 angiogenesis factor viii is elevated in cerebral metastases from non-small cell lung cancer. Proc Society of Surgical Oncology 53:19, 2000.
- 27. Harpole DH Jr., Moore MB, Herndon JA, Aloia TA, Coulon DH, D'Amico TA. Serum Markers in Localized Non-small Cell Lung Cancer. March 2000 Proc of Am Assoc Cancer Res A4397; 2000.
- Moore-Joshi MB, Danenberg KD, Lord RV, Uteake H, Danenberg PV, Harpole DH Jr. 28. Low Thymidulate Synthase and ERCC1 Gene Expressions are associated with increased survival after neoadjuvant 5-FU/Cisplatin/Radiotherapy for Esophageal Adenocarcinoma. Proc Am Soc Clin Oncol, 2000.
- Aloia TA, Harpole DH Jr., D'Amico TA. CK19 is superior to MUCI as a marker of 29. micrometastases in patients with on-small cell lung cancer. Surgical Forum 2000.
- Onaitis M, Harpole DH Jr., Hartwig M, Amico TA, Moore MB, Pendergast AM, Tyler D. 30. Novel alterations of the adaptor protein crkl in lung cancer. Surgical Forum 2000.
- Salgia R., Harpole DH Jr., Herndon JA, Pisick E, Elias A, Skarin A. Role of serum tumor 31. markers CA125 and CEA in non-small cell lung cancer. 9th World Conference on Lung Cancer 2000.
- 32. Afoia TA, Harpole DH Jr, Moore MB, Reed CA, Affegra CA, D'Amico TA Molecular biologic staging in patients with node-negative esophageal carcinoma. Proc. Southern Thoracic Surg Assoc, 2000.
- D'Amico TA, Moore MB, Aloia TA, Conlon D, Harpole DH Jr., Predicting the site of 33. metastases from lung cancer using molecular biologic markers. Proc. Southern Thoracic Surg Assoc, 2000.
- 34. Kelley MJ, Li S, Harpole DH, Jt., Mutational analysis of beta-tubulin gene (TUBB) in non-small cell lung cancer. Proc Soc Clin Oncol, 2001
- Harpole LH, Nolle, KC, D'Amico TA, Grawford JN, Harpole DH, Jr. Assessing lung 35. cancer patient outcome at point of service, Proc Soc Clin Oncol, 2001
- Harpole DH, Jr, To K, Moore MP, Brooks KR, Conlon DH, Aloia TA, D'Amico, TA 36. Measurement of Navelbine resistance markers in patients with stage III non-small cell lung cancer: A Novel Approach for Patient Selection. Proc. Southern Thoracic Surg Assoc, 2001
- Brooks KR, Aloia TA, Harpole DH, Jr., D'Amico TA. Bone Marrow CK-19 :1-PCR 37.

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correlates with stage in patients with non-small lung cancer, Surgical Forum 2002.

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- 38. Brooks, KR, Joshi MBM, Conlon D, D'Amico TA, Herndon J, Harpole DH, Jr. Serum protein expression as a marker of disease failure in clinical stage 1 non-small cell lung cancer, 2003 Annual Session of the American Association for Cancer Research, Toronto
- 39. Vlahovic G, Joshi MBM, Herndon J, Crawford J, Harpole DH, Jr. Frequency of STI571 specific tyrosine kinase expression in stage I non-small cell lung cancer (NSCLC). 2003 Annual Session of the American Association for Cancer Research, Toronto, CA
- Atkins, BZ, Shah AS, Hutcheson TN, Pappas TN, Harpole DH, Jr., D'Amico TA. 40. Improving outcomes following esophagogastrectomy the importance of pulmonary complications. 50th Annual Session of the Southern Thoracie Surgical Association, Bonita Springs, FL, 2003
- 41 Brooks K, Harpole DH, Ir., Moore MB, Conlon D, D'Amico TA. Serial measument of serum markers in patients with non-small cell lung cancer. 50th Annual Session of the Southern Thoracie Surgical Association, Bonita Springs, FL, 2003
- Burfeind WR, D'Amico TA, Toloza E. Wolfe WG, Harpole DH, Jr . Low morbidity and 42. mortality for bronchoplastic procedures with and without induction therapy, 51st Annual session of the Southern Thoracic Surgical Association, Cancun, Mexico, Nov 2004
- 43. Lemaire A, Burfeind WR, Balderson S, D'Amico TA, Harpole, DH, Jr. Benefits and risks of trachobronchial stent placement in patients with malignant airway disease. 51st Annual session of the Southern Thoracic Surgical Association, Cancun, Mexico, Nov 2004.
- Lemaire A., Burfeind WR, Balderson S., D'Amico TA, Harpole, DH, Jr. Benefits and risks 44. of trachobronchial stent placement in patients with benign airway disease. ACCP Annual meeting, Oct, 2004
- Moore Joshi MB, Petersen RP, Miller C, Conlon D, Brooks K, D'Amico TA, Harpole 45. DH, Ir. Serial assessment of serum markers predicts recurrence in patients with localized non-small cell lung cancer. IASLC World Lung Cancer Bi-annual Meeting, Barcelona, Spain, July 2005 (Lung Cancer 2005; 49:895)
- Petersen RP, Moore Joshi MB, Potti A, Nevins J, Harpole DH, Jr. Gene expression array 46. profiles and patients with early stage non-small cell lung cancer. IASLC World Lung Cancer Bi-annual Meeting, Barcelona, Spain, July 2005 (Lung Cancer 2005; 49:0122)
- Ramiah VS, Potti A, Peterson RP, Harpole DH, Jr., Lancaster L, Berchuck A, Ortel 47. T. Gene Expression Patterns Identify Patients With Non-Small Cell Lung Cancer (NSCLC) And Ovarian Cancer Who Are At Increased Risk Of Venous Thromboembolism (VTE). Hematology and Thrombosis Society Annual Meeting, 2006

- 48. M. M. Joshi, R. P. Petersen, D. E. Conlon, K. Tanaka, D. Shimizu, H. Kuramochi, M. Williams, P. V. Danenberg, K. D. Danenberg, D. H. Harpole. Differential canonical pathways derived from microarrays using RNA from paraffin-embedded non-small cell lung cancer tissue. American Society of Clinical Oncology Annual Meeting, Atlanta, GA, June 2006
- Strauss GM, Herndon JE, Maddaus MA, Harpole DH, Johnstone DW, Johnson EA, Watson DM, Sugarbaker DJ, Schilsky RA, Vokes BE, Green MR. Aduvant chemotherapy in stage IB non-small cell lung cancer (NSCLC): Update of Cancer and Leukemia Group B (CALGB) protocol 9633. PASCO 365s, abstract no. 7007, 2006
- 50. Potti A, Mukherjee S, Prince R, Dressman HK, Bild A, Koontz J, Kratzke R, Watson MA, Kelley M, Ginsburg G, West M, Nevins JR, , Harpole DH, Jr. A Genomic Strategy to Refine Prognosis and Therapeutic Decision for Adjuvant Therapy in Non-Small Cell Lung Carcinoma. American Society of Clinical Oncology Annual Meeting, Atlanta, GA, June 2006
- e. Editorials, Position, and Background Papers:
- Expression of molecular markers in early stage hing cancer, Clin Lung Cancer, 1999.
- Expression of Her2-neu measured by immunohistochemistry or ELISA, Ann Thorac Surg 2000.
- d. Invited Presentations
- Harpole DH Jr, Bigelow C, Young WG, Wolfe WG, Sabiston DC. Alveolar cell carcinoma: a retrospective analysis of 205 patients. Presented at the 34th Annual Meeting of the Southern Thoracio Surgical Association, 1987.
- Harpole DH Jr, Jones RH. Postoperative evaluation of ventricular function on coronary artery bypass grafting patients using the radionuclide angiocardiogram. Duke University Medical Center Cardiovascular Symposium 1987; 23:5.
- 3. Harpole DH Jr, Skelton TN, Davidson CJ, Jones RH, Bashore TM. The acute effects of balloon aortic valvuloplasty on ventricular performance. Presented at the 60th Annual Session of the American Heart Association
- 4. Harpole DH iz, Jones RH, Bashore TM. Serial evaluation of left ventricular function after a rule valvuloplasty utilizing first-pass radionuclide angiocardiography Presented at the 60th Annual Session of the American Heart Association.
- Davidson CJ, Harpole DH Jr, Skelton TN, Kisslo KB, Kisslo JA, Jones RH, Bashore TM.
 The early rise in the aortic gradient following aortic valvuloplasty is due to improved left
 ventricular performance. Presented at the 11th Annual Session of the American College
 of Cardiology.

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- 6. Harpole DH Jr, Wolfe WG, Rankin JS, Clements FM, Jones RH. Efficacy of crystalloid cardioplegia during cardiac valvular operations. Presented at the 61st Annual Session of the American Heart Association.
- 7. Harpole DH Jr, Skelton TN, Jones RH. Systolic performance using radionuclide angiography and micromanometer pressure at baseline and six months after acttic valvuloplasty. Presented at the 61st Annual Session of the American Heart Association.
- 8. Harpole DH Jr, Jones RH. Serial assessment of ventricular function after nortic valve replacement for acrtic stenosis. Doke University Medical Center Cardiovascular Symposium 1988; 24:13.
- 9. Harpole DH Jr, Rankin JS, Wolfe WG, Young WG, Van Trigit P. Jones RH. Effects of standard mitral valve replacement on left ventricular function. Duke University Medical Center Cardiovascular Symposium 1989; 25:3.
- Harpole DH Jr, Rankin JS, Wolfe WG, Jones RH. Changes in left ventricular systolic 10 load immediately following valve replacement. Presented at the 62nd Annual Session of the American Heart Association.
- Harpole DH Jr, Rankin JS, Wolfe WG, Young WG Van Trigt P, Jones RH. Effects of 11. standard mitral valve replacement on left ventricular function. Presented at the 25th Annual Meeting of the Society of Thoracic Surgeons, 1989.
- 12. Harpole DH Jr, Johnson CM, Wolfe WG, George SL, Seigler HF. Analysis of 945 cases of pulmonary metastatic melanoma. Presented at the 17th Annual Meeting of the Western Thoracic Surgical Association, 1991.
- 13. Harpole DH Jr, Feldman JM, Buchanan S, Young WG, Wolfe WG. Bronchial Carcinoid Turnors. Presented at the 38th Augual Meeting of the Southern Thoracic Surgical Association, 1991.
- Harpole DH Jr. Diagnosis and treatment of melanoma involving the lung. Presented at 14. the Sixth Annual Session of the Melanoma Consortium, 1993.
- Harpole DH Jr, Sleckman BG, Strauss, GM, Sugarbaker DJ. Multimodality therapy for 15. chest wall invasive lung cancer. Presented at the 47th Annual Session of the Society of Surgical Oncology, 1994.
- 16. Harpole DH Jr, DeCamp MM Jr, Mentzer SJ, Reilly JJ Jr, O'Donnell W, Sugarbaker DJ. A prospective analysis of dysrhythmias after pneumonectomy. Am J Respir Crit Care Med 1994; 149(4 pt 2): A507. Presented at the 70th Annual Session of the American Lung Association / American Thoracic Society, 1994.
- 17. Harpole DH Jr, Young WG, Wolfe WG. Stage I lung cancer: A multivariate analysis of 289 cases. Presented at the 80th Plenary Session of the Clinical Congress of the

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American College of Surgeons, 1994.

- Harpole DH Jr, DeCamp MM, Daley J, Hur K, Optian CA, Henderson WG, Sugarbaker 18. DJ, Khuri SF and the Participants in the National VA Surgical Risk Study; Prognostic models of 30-day morbidity and mortality after major pulmonary resection. Presented at the 31st Annual Meeting of the Society of Thoracic Surgeons, 1995.
- Harpole DH Jr, Strauss GM, Sugarbaker DJ. Multimodality therapy for malignant pleural 19. mesothelioma, Presented at 1995 Spring Meeting, The Cancer and Leukemia Group B.
- 20. Harpole DH Jr, Herndon JE, Richards WG, Sugarbaker DJ. Anglogenesis and molecular biologic staging in localized lung cancer. Presented at the 42nd Annual meeting of the Southern Thoracic Surgical Association, 1995.
- Harpole DH Jr. The Evolution of Therapy for Patients with Stage IIIA (N2) Lung 21. Cancer, Harvard Multimodality Therapy of Chest Malignancies - Update 96.
- 22, Harpole DH Jr. Major Complications after Pulmonary Resections, American College of Surgeons Postgraduate Course-1996
- Harpole DH Jr. Molecular Biologic Staging in Non-small Cell Lung Cancer, American 23, Society of Clinical Oncology Postgraduate Course-1997
- Harpole DH Jr. From Atypia to Metasfasis in Non-small Cell Lung Cancer American 24. College of Surgeons Postgraduate Course-1997
- Harpole DH Jr. Primary and Metastatic Chest Wall Tumors, Southern Thoracio Surgical 25. Association Postgraduate Course 1997
- Harpole DH Jr. Molecular Biological Marker in Non-small cell lung cancer. 26. American College of Chest Physicians Postgraduate Course-1998
- Harpole DH Jr. Molecular Biology of Lung Cancer. Southern Thoracic Surgical 27. Association Postgraduate Course 1999
- Harpole DH Jr. Melecular Biology of Lung Cancer, 5th Annual Thoracic Oncology 28. Seminar, Charleston, SC 2000
- Fungal Infections in the Immunocompromised Host. American College of Surgeons 29. Postgraduate Course-2000
- Advances in the Therapy of Esophageal Cancer. Visiting Professor: University of Texas-30. Southwestern, Dallas, Tx, January 2001/
- Application of Molecular Biology into Clinical Treatment of Non-small Cell Lung 31. Cancer. Visiting Professor: Oregon Health Science University, February 2001

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- Invited Moderator, Thoracic Surgery Forum, American Association for Thoracic Surgery, 2001 San Diego CA.
- Surgical Therapy for Early Stage Lung Cancer. 6th Annual Perspectives in Thoracic Oncology, Charleston, SC Oct 2001
- Surgical Therapy for Stage III Non-small Cell Lung Cancer. National Oncology Research Council Chicago, IL April 2002
- Diagnosis and Management of Malignant Pleural Effusions. National Oncology Research Council New York, March 2002
- Diagnosis and Management of Malignant Pleural Effusions. National Oncology Research Council Washington, DC June 2002
- Surgical Therapy for Stage IIIA Non-small Cell Lung Cancer. 7th Annual Perspectives in Thoracic Oncology, New York, NY Oct 2002
- Background and Importance of Databases in Thoracic Surgery, Society of Thoracic Surgeons, San Diego CA, Feb 2003
- Invited Moderator, Thoracic Surgery Forum, American Association for Thoracic Surgery, 2003 Boston, MA.
- Advances in Therapy for Non-small Cell Lung Cancer, Visiting Professor: Case Western Reserve University, Cleveland OH, March 2003
- Innovated Surgical Approaches to Patients with Lung Cancer, Visiting Professor: Cancer Center of Central Pennsylvania, Penn State School of Medicine, Harrisburg, PA, March 2003
- 42. Invited Speaker: Lung Cancer Session: American Society of Clinical Oncology Annual Session, Chicago, IL, June 2003.
- 43. Surgical Results of the National Emphysema Treatment Trial. Medical Grand Rounds, Duke University Medical Center, June 2003.
- General Thoracic Surgery Coding: Society of Thoracic Surgeons Annual Coding Course, Fort Landerdale, FL, Oct 2003
- 45. Innovations in Surgery for Early Stage Lung Cancer. National Oncology Research Council Atlanta, GA, Oct 2003
- Surgical Staging for Non-small Cell Lung Cancer. 8th Annual Perspectives in Thoracic Oncology, New York, NY, Oct 2003

- The STS General Thoracic Database: Past, Present and Future. Annual STS Database Training Event, Chicago, IL, Oct. 2004
- 63. Innovations in Invasive Staging for Lung Cancer. National Oncology Research Council Boston, MA, Aug 2004
- New Data in Adjuvant Therapy for Lung Cancer. National Oncology Research Council Miami, FL, Nov 2004
- 65. Adjuvant and Neoadjuvant Therapy for Stage IIIA Lung Cancer. National School of Oncology Annual Meeting, Las Vegas, NV Feb 2005
- Proteomics in Non-small Cell Lung Cancer General Thoracic Surgery Club Scientific Session 2005, Naples, FL
- 67. Clinical Genomics in Non-small Cell Lung Cancer. 2nd Annual Winter Lung Cancer Conference, Miami, FL 2005
- 68. Controversies in Trimodailty Therapy for Stage III Non-small Cell Lung Cancer.
 National Oncology Research Council, New York City May 2005
- Gene Expression Signatures for Prognosis in NSCLC. Proceedings of American Society of Clinical Oncology 2005
- Monitoring Tumor Markers in Serial Scra Predicts Recurrence in NSCLC Proceedings of American Society of Clinical Oncology 2005
- Clinical and Invasive Staging for Potentially Resectable Lung Cancer Patients. ACCP Clinical Update: 2005, Boston, MA June 2005
- 72. Introduction to Industry-Sponsored Clinical Trials: Thoracic Oncology Experience. CALGB Semi-annual Meeting, St. Louis, MO June 2005
- 73. Genomics and Proteomics in Non-small Cell Lung Cancer. 11th IASLC World Lung Cancer Meeting, Barcelona, Spain, July 2005
- Lung Cancer Gene Expression and Oncogenic Pathway Predictions in Non-small Cell Lung Cancer, Glaxo-Smith-Kline Visiting Scientist, Philadelphia, PA July 2005
- Director of Cardiothoracio Postgraduate Course, Annual Clinical Congress of the American College of Surgeons, San Francisco, CA Oct 2005
- 76. Treatment Options for Stage III Non-small Cell Lung Cancer. National Oncology Research Council, Fort Laurderdele, Fl, Nov 2005

- A Genomic Prediction Model for Selecting Stage IA Patients for Adjuvant Therapy.
 CALGB Fall Meeting, Amelia Island, FL, Nov 2005
- Invited Thoracic Surgical Oncology Expert: Creating Guidelines and Educational Sessions: National School of Oncology, Seattle, WA Nov 2005.
- Invasive and Non-invasive Staging of Non-small Cell Lung Cancer. Reality Oncology: Lung Cancer, Fort Lauderdale, FL. Nov 2005
- Neoadjuvant Therapy for Stage IIIA Lung Cancer, National School of Oncology Annual Meeting, Las Vegas, NV Feb 2006
- 81. Understanding Clinical Genomics and Lung Cancer, Visiting Professor: University of Pennsylvania, Philadelphia, Feb 2006
- 82. Genomics and Selecting Patients for Lung Cancer Trials. Visiting Professor: MD Anderson Cancer Center, Houston, TX, Feb 2006
- 83. Clinical trials in Lung Cancer: Where Do We Go From Here? Visiting Professor: University of Virginia, Charlottesville, VA, March 2006
- Invasive and Non-invasive Staging of Non-small Cell Lung Cancer. Reality Oncology: Lung Cancer, St Louis, MO, April 2006
- Invasive and Non-invasive Staging of Non-small Cell Lung Cancer. Reality Oncology: Lung Cancer, Indianapolis, IN, April 2006
- 86. Treatment of Patients with Early-stage Non-small Cell Lung Cancer: An Evolving Paradigm. Grand Rounds. George Washington University, May 2006
- Harpole DH. Ir., Joshi MB, Petersen RP, Conlon DH, Tanaka K, Shimizu D, Kuramochi H, Williams M, Danenberg PV, Danenberg KD. A lung cancer genomic risk prediction model derived from paraffin-embedded tissue
- The Role of Genomics and Adjuvant Chemotherapy in Patients with Non-small Cell Lung Cancer: Medical Center grand Rounds, University of Miami School of Medicine, June 2006
- Neoadjuvant Therapy for Stage IIIA Lung Cancer: Surgical Issues. National School of Oncology, Chicago, IL July 2006

Consultant Appointments:

1995 - 1996 Staff Thoracic Surgeon, The Carney Hospital, Boston, MA 1995 - 1996 Staff Thoracic Surgeon, The Faulkner Hospital, Boston, MA 12/05/2006 09:01 PAX

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Professional Awards and Special Recognition:

1972	Eagle Scout, Boy Scouts of America
1976-1980	Robert E. Lee Research Scholar, Washington & Lee University
· ·	(Inorganic Chemistry)
1976-1980	James P. Davidson Academic Scholarship, Washington & Lee University
1979	National Science Foundation Research Scholar, University of North
	Carolina (Molecular Biology)
1984	Raven Honorary Society of the University of Virginia
1986-1988	Raymond W. Postlethwait Fellow in Thoracic Surgical Research
1989	Finalist, Leibig Vascular Research Award, Society of Vascular Surgeons
1991	Finalist, Paul C. Sampson Resident Research Award of the Western
	Thoracic Surgical Association
1996-1998	Who's Who in Medicine and Healthcare
1997	Who's Who in North America
1998	Outstanding Young Men of America
1999-2003	Who's Who in the World
1999-2003 -	Who's Who in the South and Southwest
1999	Nationally recognized in Good Housekeeping Magazine-
1999	Cancer Doctors for Women
2000-2003	Who's Who in Medicine and Healthcare
2000-2003	Who's Who in America
2000-2004	Swarthmore's Who's Who
2000	Presidents Award, Southern Thoracic Surgical Association
2002	J. Maxwell Chamberlain Memorial Paper, Society of Thoracic Surgeons
2003	Guide to America's Top Surgeons
2004	America's Top Cancer Doctors
2004	Who's Who in Medical Sciences Education
2005	International Health Professional of the Year
2005	I. Maxwell Chamberlain Memorial Paper, Society of Thoracic Surgeons
2005	Guide to America's Top Physicians
2005	Maxwell's Who's Who of North America
. 2006	Maxwell's Who's Who of North America
2006	International Who's Who

National Caucey Institute Clinical Trials

1998 CALGB 398105: Correlative Science Companion to CALGB 9633: A randomized phase III trial of adjuvant chemotherapy versus observation for patients with stage IB NSCLC (n=400) Role: PI Status; Completed

2001 ACOSOG 4031: Proteomic Analysis in Patients with Nodules Suspicious for NSCLC: Validating a Predictive Model (n=1000) Role: PI Status: Completed

2005 CALGB 30506: A Randomized Phase III Trial to Evaluate the LUNG

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1993	Clinical Investigator, National Institutes of Health, No. 22724
1994	Surgical Modality Committee, Cancer and Leukemia Group B
1994	Solid Tumor Correlative Science Committee, Cancer and
	Leukemia Group 3
1994	Respiratory Tumor Subcommittee, Cancer and Leokemia Group B
1994	Gastrointestinal Tumor Subcommittee, Cancer and Leukemia Group B
1994	Thoracic Surgery Chairman, National VA Surgical Quality Improvement Program
1996-200	
1997	Society of Thoracic Surgeons: National Cardiothoracic Database Committee
1997	Chairman, Society of Thoracic Surgeons: General Thoracic Surgery Subcommittee
1997-200	
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1999	Database Committee Chairman, General Thoracic Surgery Club
2000	American College of Surgeons (ACOS) Oncology Group
2001	Vice-chairman, American College of Surgeons Oncology Group
2001	CALGB Correlative Science Grant Review Committee
2001-200	Thoracic Surgery Research Foundation Grant Review Committee
2002-	Secretary / Treasurer of Sabiston Surgical Society
2001	National Comprehensive Cancer Network (NCCN)
2002	Invited Participant: 2nd NCI State of Science Meeting: Lung Caucer
2002	NCCN Genomics Task Force
2002-200:	
2002	ACOS Commission on Cancer Thoracic Disease Site Co-Chairman
2002-2003	Director's Committee on Gene Array Analysis in Adenocarcinoma
2003	Program Committee, 50th Annual Session of the Southern Thoracic Surgical Association
2003	American College of Surgeons Advisory Council for Cardiothoracic Surgery: Program Committee Representative
2004	Program Committee, 51 st Annual Session of the Southern Thoracic Surgical Association
2004	American Association for Thoracic Surgery Cardiothoracic Residents Committee, C. Walton Lillihei Residents Forum
2004	American Association for Thoracic Surgery Scientific and Government Relations Committee
2001-2004	
2004	Membership Committee Society of Clinical Surgery
2004	Evarts Graham Memorial Fellowship Committee Chairman
2004	American College of Surgeons: Cardiothoracic Council
2004	Program Committee, Annual Clinical Congress, ACS
2005	Scientific Program Committee American Society of Clinical Oncology
2005	Cancer Communications Committee, American Society of Clinical
	Oncology

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	2005 2005 2005 2005 2005	Clinical Trials Committee, American Society of Clinical Oncology Program Committee: Society of Thoracic Surgeons Society of Thoracic Surgeons Relative Value Update Committee Program Committee Chair, 52 nd Annual Session of the Southern Thoracic Surgical Association
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Ì	Regional Comu	
	1993 - 1996	Promision Company 1 10 (All Child A Lithin
	1994 - 1996	Brockfon/West Roxbury VAMC Cancer Committee
	1995 - 1996	Steering Committee, Dana Farber Thoracic Oncology Program
	1995 - 1996	Transfusion Committee, Brigham & Women's Hospital
	1995 - 1996	Endoscopy Committee, Brigham & Women's Hospital
	1995 - 1996	Laparoscopy Committee, Brigham & Women's Hospital
	1996-2003	Cancer Protocol Committee, Duke Comprehensive Cancer Center
	1996-2002	Advisory Committee, Duke Thoracic Oncology Program (Clinical Subcommittee, Chairman)
	1996-	Director, Thoracic Oncology, Durham Veterans Affairs Medical Center
	1998-2003	Transfusion Committee
	1999-2003	Academic Council: Duke University
	1999-2001	Advisory Committee, Dean's Group III, Duke School of Medicine
	2003-2005	Clinical Research Advisory Board, Duke University School of Medicine
	2003-2004	Department of Surgery Compensation Committee
* 4	2003-2004	Duke University Clinical Research Advisory Council Subcommittée Chairman: Standards and Credentials
	2004-	Director of Clinical Research, Department of Surgery
	2005-	Duke Cancer Genomics Program Advisory Committee
	2005-2006	Executive Council Duke Clinical Research-Oncology
	2005-	Performance Improvement Board Co-chair, CT In-patient Service
	2006-	Department of Surgery AP&T Committee Chairman

Research Grant Funding:

Previous Grants:

R-01 CA60572; Prognostic Markers in Stage I Non-small Cell Lung Cancer Total Costs \$609,000 Interval: 2 years Role: Co-investigator

U-10 CALGB Surgical Grant

Total Costs \$1,750,000 Interval: 5 years Role: Co-investigator

US Surgical: Prospective Thoracoscopy Database Total Costs \$25,000

Role: Principal investigator

Interval: 2 years

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Duke Comprehensive Cancer Center: Resistance Marker Expression in Cancer Total Costs \$50,000 Interval: 2 years Role: Principal investigator

R-29 CA69648: Tissue and Serum Indicators of Lung Cancer Recurrence Total Costs \$539,000 Interval: 6 years

Role: Principal investigator

Glaxo-Smith-Kline: Navelbine Resistance Marker Analysis in Lung Cancer

Total Costs \$60,000 Role: Principal investigator

Interval: 2 years

VA Merit Review: Serum Markers in Non-Small Cell Lung Cancer

Direct Costs \$625,000 Interval: 5 years

Role: Principal investigator

Bristol-Meyers-Squib: Resistance Marker Expression in Esophageal Cancer

Total Costs \$50,000 Interval; 2 years

Role: Principal investigator

Adventis: Taxane: Resistance Marker Analysis in Lung Cancer

Total Costs \$100,000

Role: Principal investigator

Interval: 2 years

Current Grants:

U-10 CALGE Surgical Grant: Renewal

Total Costs \$1,900,000 Interval: 5 years

Role: Co-investigator (Duke is the top accruing center in CALGB)

2000 - \$68,400 2001 - \$81,600 2002 - \$124,300 2003 - \$160,000 2004~ \$80,000

2005- \$120,000 2006: \$160,000

NCI-CA114771-01

Molecular Signatures of Lung Cancer PI: David Carbone, Vanderbilt University Role: Co-investigator, Serum Bank Pl

Interval: 5 years \$5,000,000 Direct Costs \$120,000 Direct Costs

R01-CA-116648-01

Validating Molecular Signature Risk Models of NSCLC Direct Costs \$1,999,890

Role: Principal investigator

Interval: 4 years

Submitted Grant Proposals (2006)

12/05/2008 09:03 FAX

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American Lung Association: Gene Expression Signatures of Oncogenic Pathway Deregulation in NSCLC | Direct Costs \$200,000 | Interval: 2 years

Role: Principal investigator

R21-CA

Evaluating Gene Array-based Risk Models in Paraffin-embedded NSCLC

(RFA-PA06-299) Direct Costs \$275,000

Interval: 2 years

Role: Principal investigator

VA Merit Review

Validating Molecular Signature Risk Models of Esophageat Carcinoma Direct Costs \$750,000 Interval: 5 years

Role: Principal investigator

EXHIBIT 66C99

Patient: HOGGE, CLAIRORNE FRE179

Rad Rpt; Final 09/11/2008 19:04 Rooff 4302117 Acces

MYCCARD PERF REST SPECT GATED SPECT FOR WALL MOTION GATED SPECT FOR BJECT PRACT

Verlfied

CLIMICAL MISTORY : 65 y/o male, Lung CA

INDICATIONS :

Onumen
995.20, Unspecified advance affect of drug, medicinal
and biological substance
V56.69, forg-form high-risk drugs currently used

TECHNIQUE : Rost

HADTOPHARMACEUTICAL : Rest : 27.0 mcl of Tc+99m Myoview, IV

COMPARISON : None

image analysie:

Left Ventricle analysis ,

	Rest	Conclusions
 High Anteroloteral 	Normal.	Normal.
- Log Anterolateral	Mormal	Можина 1.
- High Posterolatera	l Normal	Normal
- Low Posterolateral	Normal	Lemron
- Righ Interior	Normal	Normal
- Low Anterior	Normal	Normal
- Antercapical	Noowal	Normal
- Posterobasal	Noimal	Normal
- Inferior	Normal	Normal
- Inferospical	Normal	Noimal
 Inferoseptal 	Mozmal	Normal
- Anteroseptal	Normal	Normal

Additional comments ; The resting LVBF, by quantitative gated SPDCT

imaging, is 52%. Normal wall motion.

I provided impediate supervision during the conduction of this testing and personally performed the interpretation.

Report Release Date/Time: 200609111116 Approving MD: BORSES-NBTO. SALVADOR MD

Ordering ud: Warrs, Lawrence b Order Reason: Meant opent day: Lawr ca Graff 383-0338-6964-5538

Patient HÖGGE, CLAIBORNE F88179

Red Rpf; Final 09/11/2008 10:04 Reg# 4302117 Acct#

eBrowser Result for: FB8179 Printed by: MORANB19 10/18/2006.8:21:59 PM

MYOCARD PERF REST SPECT CATED SPECT FOR WALL MOTION GATED SPECT FOR BJECT PRACT

Verified

CLINICAL HISTORY : 65 y/o male, Tung CA

INDICATIONS

OTHERS

995-10; Compactified adverse effect of drug, medicinal and biological substance vs8.69, Long-term high-risk drugs currently used

TECHNIODE : Rest

RADIOPHARMACEDZICAL: Rest : 27.0 mci of re-99m Myoview, IV

COMPARISON : None

IMAGE ANALYSIS;

Left Ventricle Analysis :

	Rest	CONCINETO
- High Anterolateral	Normal	Normal
- Low Anterolateral	Normal	Normal.
- High Posterolateral	Normal	Novoa L
- Low Posterolateral	Normal	Mormal
> High Anterior	Normal	Normal
- Low Anterior	Normal	Mormal
- Antercapical	Normal.	Normal
- Fosterobasal	Normal	Normal.
- Inferior	Novaal	Mormal
- Infercapical	Normal	Mozpal
- Inferoseptal	Normal	Nordal
- Anteroseptal	Normal	Normal

Additional Comments

: The resting LVEF, by quantitative gated

imaging, is 52%. Normal wall motion.

I provided immediate supervision during the conduction of this besting and personally performed the interpretation.

Report Release Date/Time: 200609111116 Approving MD: BORGES-NETO, SALVADOR MD

ORDERING MD: HARKS, LAWRENCE B'

ORDER REASON: HEART SPECT DX: LUNG CA CPART# 383-0338-6964-5528

Patient HOBGE, CLAIBORNE FB8179

Rad Rpt: Finaj 09/11/2006 10:04 Req# 4302117 Acci#

myocahd perf rest spect Gayed spect for Wall Motion

GATED SPECT FOR EJECT PRACT

Verified

Result for: 1788179 Printed by: MORAN019 10/18/2006 8:21:59 PM

2 of 10

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CLINICAL HISTORY :
                    55 y/o male, tung ta
INDICATIONS
```

995.20, Unspecified adverse effect of drug, medicinal and biological substance V58.69, Long-term high-risk drugs currently used

TECHNIQUE : Rest

RADIOPHARMACENTICAL: Rest : 27.0 mCl of TC=99m Myoview, IV

COMPARISON f Nono

IMAGE ANALYSIS:

IMME AMALIAIO: Left Ventitule Analysis :

	Account to the second second	Hesc	Concrusions
er.	Righ Anterolateral	Normal	Nozmal
- ,	Low Anterolateral	Normal	Normal
4	High Posterolateral	Normal	DOLLAS I
***	Low Posterolateral	Normal	Normal
œ.	High Anterior	Normal	Learning
-	Low Anterior	Normal	Normal
200	Anteroapical	Monnal	Normal
-11 2	Posterobasai	Normal	Normal
30	Inferior	Normal	Normal.
	Inferospical	Normal.	Normal.
•	inferoseptal	Normal.	Normal
45	Anteroseptal	Normal	normal.

: The resting LVEY, by quantitative gated Additional Comments SPECT

imaging, is 52%. Normal wall motion.

I provided immediate supervision during the conduction of this and personally performed the interpretation.

Report Release Date/Time: 200609111116 Approving MD: BORGES-NETO, SALVADOR ND.

ONDERING HOT MARKS, LAWRENCE B

ORDER REASON: HEART SPECT DX: LUNG CA GRATE 383-0338-6964-5528

Patient HOGGE, CLAIBORNE F88179

Rad Rpt: Final 08/23/2008 14:05 Req# 4277102 Acctd 244876

RENAL BLOOD FLOW + SCAN

Verified

Muclear renal study, 8/23/2005

Indication: Mesotheliona, Preradiation renal evaluation.

eBrowser Result for: FB8179 Printed by: MORANO19 10/18/2006 8:21:59 PM 3.of 10

Radiopharmacoutical and technique; 10.6 mgt rc-99m MAG3 administered intravenously. Plow phase images of the kidneys were obtained during bolis injection of radiotracer and printed at three second frames out to 80 seconds. Sequential 3 minute excretion phase acquisitions were obtained out to 30 minutes. Time/activity curves for both the renal cortex and the whole kidneys were obtained.

Pindings: Flow images demonstrate prosper uptake within the kidneys bilaterally. There is sympetric perfusion noted. Cortical phase images described normal size and location of both kidneys.

Split renal function is estimated at 49 % on the right and 51 % on the light

Right kidney is normal in appearance and morphology. There is prompt uptalog, clearance, and excretion of radiopharmaceutical. The right kidney time to peak is approximately 4.57 minutes.

Laft kicker is normal in appearance and morphology. There is prompt uptake and clearance of radiopharmaceutical, some activity remains in the left remal collecting system at the end of the examination, which clears on the post void hase. Time to peak on the left is approximately 6.57 minutes.

Impression:

- 1. No evidence of obstruction bilaterally.
- 2. Symmetric renal function as above.
- T have reviewed the film and concur with the above findings.

Repart Relames Date/Time: 20060823170434437 Resident MD: Weber, Kevin Approving MD: Wens, TERENCE Z MD

ATTENDING HD: HARKE, LAWRENCE B ORDERLING MD: MARKE, LAWRENCE B ORDER REASON: UNK

Patient: HOGGE, CLAIBORNE FE8179

Red Rote Final 07/25/2006 10:22 Req# 4231976 Acces 026710

CHEST-ROUTING PA AND LAT

Verlited.

Comparison: 6/13/2006

Findings: Status post left premonectory. Increasing fluid within the left hemitherax with residual but smaller hir component. The right lung remains clear. Skin scaples have been removed.

Impresation: Status post pneumonectomy with increasing left pleural fluid.

I have reviewed the film and concur with the above findings.

eBrowser Result for: FB8179 Printed by: MORANO19 10/18/2006 8:21:59 PM

Report Melease Date/Time: 20060725144518327 Resident MD: Daniels, Shannon Approving MD: WASHINGTON, IDITH LACEY MD

ATTENDING HD: HARFOLE, DAVID HAROLD OR ORDER REASON: MESOTHELIONA

Patient: HOGGE, GLAIBORNE FE8179

Rad Rpt: Final 05/29/2008 18:40 Req#4144278 Acct# 510325

CHEST-ROUTINE PA AND LAT

pertified

impression: 1. Postop changes in the right hemichorax following preumonactomy. 2. Stable left hemiliforax.

Report Release Date/Time: 20060525100230250 Approving MD: PAYS, EDWARD F MD

ATTENDING M: HARDOLS, RAVID HAROLD JR ORDER DESCON: G/P TROPACOTOMY - BVAL RUSHA

Patient: HOGGE, CLAIBORNE FB8179

Rad Rpt: Final 05/27/2008 11:15 Reg# 4142335 Accid 510325

CHEST-ROTPING PA AND LAT

verified

Comparison: 5/26/2006

rindings and impression: Support appliances stable: large left hydropneumorborax not significantly changed, Right lung clear.

I have reviewed the films and concur with the above findings.

Report Release Date/Time: 20060528095951907 Resident ND: Hirasaki, Ken Approving ND: McRhams, NCIMAN F ND

attending MD: Harfold, David Harold or Cruzaing MD: Diesen, Diana I, Cruzaing Reason: S/F Thoracciony, Evaluate for Preconstiturax

Patient HOGGE, CLAIRORNE FB8179

eBrowser Result for FES179 Printed by: MORAN019 10/18/2006 8:21:59 FM

5 of 10

Patient: HOGGE, CLAIBORNE FB8179

Rad Rpt: Final 11/21/2008 09:39 Req# 4411956 Acci# 882698

CHEST-ROUTINE PA AND LAT

Paul, Hanley & Harley LLP

DEC 0 9 2000

Case Attorney Forwarded to

Overnight Hand

Verified

Comparison: 11/14/2006

Findings and impression: No significant interval change status post left pneumonectomy. No change cystic lucency in the right apex consistent with bullous disease. Foorly defined opacity projected over the clavicle on the right, unchanged.

I have reviewed the films and concur with the above findings.

Report Release Date/Time: 20061121172423280 Resident MD: Paldino, Michael
Approving MD: WASHINGTON, EDITH LACRY MD

ATTENDING MD: CRAWFORD, JEFFREY ORDERING MU: CRAWFORD, JEFFREY ORDER REASON: 163.9

Patient: HÖGGE, CLAIBORNE FB8179

Rad Rpt: Final 11/14/2006 12:13 Req# 4402339

CHEST-ROUTINE PA AND LAT

verified

Comparison: August 22, 2006.

Findings and impressions status post left pneumonectomy. Cardiomediastinal silhouette is not well assessed. Stable right lung with apical bulls an illdefined nodular opacity in the right spex. Findings are not significantly changed in the short interval, Attention on following is recommended. The right lung is otherwise stable. Mild degenerative changes of the spine.

REPORT Release Date/Time: 20061114144706797 Approving MD: MARTINEZ JIMENEZ, SANTIAGO MD

ATTENDING MD: HARPOLE, DAVID PAROLD JR ORDERING MD: HARPOLE, DAVID HAROLD JR ORDER REASON: 163.3

Pallent HOGGE, CLAIBORNE FB8179

GENLAB Hematology: Final 09/25/2006 07:17 Acc# 000626801839 Acct#454282

eBrowser

Result for: FB8179 Printed by: MORAN019

12/4/2006

1 of 6

AUTOMATED BLOOD COUNT

the state of the s			Kararance
HENOCTOBIN	11.2	g/đĽ	[13.7-17.3]
HEMATOCRIT	v.34	— — — — — — — — — — — — — — — — — — —	[0.39-0.49]
RED BLOOD CELL COUNT	4.45	X10^12	[4.3-75.74]
MCH	25.2	pg	[26.5-34.0]
MCHC	32.6	*	(3136.3)
RION-CV	16.0	*	[11.5-14.5]
MCV	77	fl	[80-98]
NUCLEATED REC *	0.0	/100MC	
NUCLEATED REC COUNT	0.00	X10^9	[0.000.00]
PLATELET COUNT /L	211	X10^9	[150150]
WHITE BLOOD CELL COUNT	4.1	x10^9	[3. 2 9.8]

ATTENDING MD: MARKS, LAWRENCE B

ORDERING ND: MARKS, LAWRENCE B

PERFORMED BY:

MORRIS SLDG CLIN RM5150 MORRIS BLDG DUMC DURHAM, NC 27710

Patient HOGGE, CLAIBORNE F88179

Rad Rpt: Final 09/11/2006 10:04 Reg# 4302117 Acct#

MYOCARD PERP REST SPECT GATED SPECT FOR WALL MOTION

GATED SPECT FOR EJECT FRACT

Verified

CLINICAL HISTORY (65 y/o male, fung CA INDICATIONS

955.20, Unspecified adverse effect of drug, medicinal and biological substance
VSS.69, Long-term higheisk drugs currently used

TECHNIQUE : Rest

RADIOPHARMACRUTICAL: Rest : 27.0 mCl of Te99m Myoview, IV

COMPARISON

IMAGE ANALYSIS:

Left Ventricle Analysis :

		Rest	Conclusion
100	High Anterolateral	Normal	Normal
940	Low Anterolateral	Normal	Norma 1
	High Posterolateral	Normal	Normal
	Low Posterolateral	Normal	Norwall
	High Anterior	Normal	Normal
	Low Anterior	Normal	Normal
	Anteroapical	Normal	Normal.
	Posterobasa1	Normal	Normal
	Inferior	Notwal	Normal
9	Infercapical	Nozwal	Normal.
÷	Interoseptal	Normal	Normal
37	Anteroseptal	Normal	Normal

Additional Comments SPECT

. The resting LVEF, by quantitative gated

imaging, is 52%. Normal wall motion.

I provided immediate supervision during the conduction of this testing and personally performed the interpretation.

Report Release Date/Time: 200609111116 Approving MD: BORGES-NETO, SALVADOR MD

ORDERING MO: MARKS, LAWRENCE B ORDER REASON: HEART SPECT DX: LUNG CA GRNT# 3890318-6954-5528

Patient: HOGGE, CLAIBORNE FB8179

Rad Rol: Final 09/11/2008 10:04 Reg# 4302117

MYOCARD PERF REST SPECT CATED SPECT FOR WALL MOTION GATED SPECT FOR BURGT PRACT

Verified

CLINICAL HISTORY : 65 y/o male, Lung CA INDICATIONS

OTHERS

995,20, Unspecified adverse effect of drug, medicinal and biological substance V58.69, Long-term highrisk drugs currently used

TECHNIQUE Rest

RADIOPHARMACEUTICAL: Rest : 27.0 mcl of re99m MyoView, IV

COMPARISON None

IMAGE ANALYSIS: Lefr ventricle Amalysis .

. Venoticle marysas	Rest	Conclusions
- High Anterolateral	Normal	Normal
- Low Anterolateral		Normal.
- High Posterolatera	l Normal	Normal
- Low Posterolateral	Normal	Normal
- High Anterior	Normal	Normal
- Low Anterior	Normal	Norma I
- Antercapical	Normal	Noxwal
- Posterobasal	Normal	Normal
- Inferior	Normai	Normal
- Intercapical	Normal	Normal
- Inferoseptal	Normal	Normal
- Anteroseptal	Wormal	Normal

Additional Comments

: The resting LVEF, by quantitative gated

imaging. is 52%.

Normal wall motion.

I provided immediate supervision during the conduction of this testing and personally performed the interpretation.

Report Release Date/Time: 200609111116 Approving MD: BORGES-NETO, SALVADOR MD

Ordering Md: Marks,lawrence b Order Reason: Heart Spect DX: Long CA Grnt# 3830338-5964-5528

Patient: HOGGE, CLAIBORNE FB8179

Dictated Rpt: Final 09/05/2006 00:00

Radiation Oncology Clinic Note

MRN: FB8179

HOGGE, CLAIBORNE Date: 09/05/2006

DOB: Age: Radiation Oncology Clinic Note Attending: Lawrence B Marks, MD

RADIATION ONCOLOGY TREATMENT PLANNING:

The patient had treatment planning CT done recently. On this, we identified the left pleural space to be the clinical target volume. This was done with review of the preoperative imaging. Care was taken to include the visible pleural surfaces as well as subcutaneous tis sues related to the chest scar.

Associated normal tissue such as the heart, right lu ng, kidneys, bowel, and esophagus were also identified. Doses/volume constraints were identifie d for anticipated MRT.

With a conventional AP/PA approach, it is not possib to to deliver the desired dose to the inferior aspect of the tumor, without exceeding the cardiac and bowel tolerances. This is particularly challenging since the tumor wraps around the pericardial surface both anteriorly

eBrowser Result for FB8179 Printed by MORAN019 12/4/2006

and posteriorly. Further, the target is quite close stomach and some bowel tissue in the left upper abdo

to the men.

Therefore, an IMRT plan was generated. After severa iterations of this, we settled on a plan which I bel adequately balances the target coverage and normal t concerns. Using 9 IMRT coplanar fields, we were abl deliver fairly good dose distribution to the target volume. We allowed a slightly lower dose to the por the target tissues that are immediately adjacent to heart and bowel. We, therefore, defined a portion o PTV where a lower dose was acceptable. In essence, pushed the software to provide very rapid dose gradi this vicinity. The trade off for this is a slightly heterogeneity within the PTV, and slightly cold dose the PTV advacent to the heart.

ieve issue e to tion of the f the we ent in higher s în

We identified the left ventricle as well, and tried minimize the dose to this area.

to

With the current dose distribution, we could deliver 45 Gy to the clinical target volume. The dose volum histograms to the liver, kidney, bowel, heart, and 1 appear reasonable. In particular, the lung doses ap good, with a medial lung dose of about 7 or 8 Gy. T superior aspect of the left kidney got significant d the right kidney and the lower left kidney are essen spared.

about ung all pear he ose but tially

The patient has agreed to participate in the Lance Armstrong Cardiac Toxicity Study. He appears to be candidate for this, as much of the heart is getting 50% of the prescribed dose.

a good about

His PFTs done postoperatively appear reasonable with FEV1 of 1.6 L and DLCO of 52% predicted.

an

Loose ends: Cardiac studies, renal scan.

LAWRENCE B MARKS, MD Department of Redalker Choology ELECTRONICALLY SIGNED ON September 06, 2006 AT 10:04:57 AM

Case 3:07-cv-02873-MJJ Document 17-5 Filed 06/07/2007 Page 30 of 39

DD: 09/05/2006 DT: 09/05/2006 MEDQ/JOB: 594360/252828887

Result for: FB8179 Printed by: MORAN019 eBrowser 12/4/2006

EXHIBIT "B"

Superior court of california JAN 1 1 2007

COUNTY OF SAN FRANCISCO

GORDON PARK-UI, Clerk
BY:

RANI EDWARDS
Chaputy Clerk

7

EVERETT HOGGE and PRISCILLA HOGGE,

Plaintiffs.

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A. W. CHESTERTON COMPANY, et al.,

Defendants.

Court No. 452846

ORDER GRANTING PLAINTIFF'S THIRD MOTION FOR PREFERENCE

The above-entitled cause came on regularly for hearing on January 10, 2007 in Department 611 of the above-entitled court, the Honorable Diane Elan Wick, Judge, presiding. Wes Wagnon, Esq., appeared as counsel for plaintiffs Everett Hogge and Priscilla Hogge; Jill Hoffman, Esq., appeared as medical counsel on behalf of certain named defendants; appearances were also made by other counsel representing other named and served defendants in this action. The matter heard was plaintiff's third motion for trial preference pursuant to Code of Civil Procedure section 36(d).

Oral and documentary argument was submitted on behalf of the respective parties. Having considered the evidence and arguments of counsel, and being fully advised, the court rules as follows:

IT IS ORDERED that plaintiffs' third motion for trial preference pursuant to Code of Civil procedure section 36(d) be GRANTED.

IT IS FURTHER ORDERED pursuant to stipulation that motions for summary judgment may be heard on 15 days notice up to 15 days before trial and that discovery remain open through April 30, 2007?

IT IS FURTHER ORDERED AS FOLLOWS:

That jury trial in this matter be set on May 7, 2007 at 9:00 am in Department 611 of this court:

That both plaintiffs' depositions be completed not later than February 15, 2007;

That plaintiffs provide defendants with all employment and medical records, and all pathology samples not later than February 28, 2007;

That plaintiffs not later than March 15, 2007 provide a list of anticipated trial product and/or site identification witnesses, including coworkers, that will be offered against each defendant at trial, the lists to contain each witness's address and telephone number. The cut-off date for taking depositions of these product and/or site identification witnesses shall be May 2, 2007. Product and/or site identification witnesses not timely produced by plaintiffs to defendants shall be precluded from offering testimony at trial.

That all motions for summary judgment or summary adjudication be noticed for hearing in Department 302 of this court.

That all discovery motions be noticed for hearing in Department 610 of this court.

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That plaintiffs served this order on all defendants in this action.

Dated: January 10, 2007

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DIANE ELAN WIC.

Diane Elan Wick Judge of the Superior Court

CASE: 452846

Superior Court of California County of San Francisco **DEPARTMENT 611**

EVERETT HOGGE and PRISCILLA HOGGE

PLAINTIFF

A. W. CHESTERTON COMPANY

CERTIFICATE OF MAILING (CCP 1013a (4))

ORDER GRANTING PLAINTINES THE MOTION FOR PRITTINI SET

DEFENDANT

I, Rani Edwards, Deputy Clerk of the Superior Court of the County of San Francisco, certify that I am not a party to the within action.

On January 11, 2007, I served the ORDER GRANTING PLAINTIFF'S THIRD MOTION FOR PREFERENCE by placing a copy thereof in a sealed envelope, addressed as follows:

WES WAGNON, ESQ. PAUL HANLEY & HARLEY 1608 FOURTH STREET, SUITE 300 BERKELEY, CA 94710

JILL HOFFMAN, ESQ. BERRY & BERRY A PROFEESSIONAL LAW CORPORATION 2930 LAKESHORE AVE OAKLAND, CA 94610

and, I then placed the sealed envelopes in the outgoing mail at 400 McAllister Street, San Francisco, (A. 94102 on the date indicated above for collection, attachment of required prepaid postage, and mailing on that date following standard court practices.

Dated: January 11, 2007

GORDON PARK-LI, Clerk

By: RANI EDWARDS, Deputy Clerk

EXHIBIT "C"

Deborah R. Rosenthal (DRR)

From: Deborah R. Rosenthal (DRR)

Sent: Monday, June 04, 2007 12:02 PM

To: 'Tom French'

Subject: RE: Hogge v. John Crane - Proposed Stip re Remand Motion

Tom.

Thank you for your prompt response. Unfortunately your proposed dates are unacceptable, in light of Mr. Hogge's failing health, so I will move for an order shortening time and notify the court that we attempted to reach a stipulation but were unable to do so.

Regards.

Deborah

----Original Message----

From: Tom French [mailto:BTF@hassard.com]

Sent: Monday, June 04, 2007 11:36 AM

To: Deborah R. Rosenthal (DRR)

Subject: RE: Hogge v. John Crane - Proposed Stip re Remand Motion

Deborah.

The case number stamped on our papers is C07 2873 EDL.

With respect to the proposed stipulation, we are willing to stipulate to to a briefing schedule for the motion to remand that would shorten the time within which plaintiffs file their reply to our opposition and/or to shorten the time within which the motion is heard after the plaintiffs' reply is filed, but we are not willing to shorten the time within which our opposition must be filed. Among other things, I anticipate the plaintiffs will argue our client bears the burden of proof with respect to removal. As a result, we must have adequate time to respond to whatever grounds for remand are raised in the motion.

For the foregoing reasons, the briefing schedule we would propose is as follows: motion filed on 6/5/07; opposition due on or before 6/19; reply due on or before 6/22; hearing during week of 6/25 or 7/2, subject to the assigned judge's calendar. Obviously, if the motion is filed after 6/5/07, the briefing schedule would be extended accordingly.

B. Thomas Frenchi Hassard Bonnington LLP Two Embarcadero Center, Suite 1800 San Francisco, CA 94111-3993 (415) 288-9800 (415) 288-9801 fax bt@hassard.com

SERVICE NOTICE

B. Thomas French and Hassard Bonnington LLP do not accept or consent to the service of process, motions, pleadings, documents, or any other items by electronic format. Correspondence via electronic format does not indicate agreement or consent to acceptance of service in that format. The preceding e-mail message (including any attachments) contains information that may be confidential, be protected by the attorney-client or other applicable privileges, or constitute non-public information. It is intended to be conveyed only to the designated recipient(s). If you are not an intended recipient of this message, please notify the sender by replying to this message and then delete it from your system. Use, dissemination, distribution, or reproduction of this message by unintended recipients is not authorized and may be unlawful.

----Original Message----

From: Deborah R. Rosenthal (DRR) [mailto:DRosenthal@phhlaw.com]

Sent: Monday, June 04, 2007 10:36 AM

To: Tom French

Subject: RE: Hogge v. John Crane -- Proposed Stip re Remand Motion

When we spoke on Friday, I did not have a proposal for you prepared yet, which I told you repeatedly. My verbal representation to you that in past cases we had proposed to shorten the time for our reply only, and not defendant's opposition, was merely that: a representation of what we had done in the past.

My proposal for the briefing and hearing scheduled in this matter is what I sent to you via email on Friday.

Since you received my voicemail message this morning, you also know that I need the federal court case number and judge/department.

Thank you for your prompt attention to these matters. I look forward to hearing from you.

Deborah

----Original Message----

From: Tom French [mailto:BTF@hassard.com]

Sent: Monday, June 04, 2007 10:21 AM

To: Deborah R. Rosenthal (DRR)

Subject: RE. Hogge v. John Crane - Proposed Stip re Remand Motion

Deborah.

I reviewed your proposed stipulation, and contrary to what you told me late Priday afternoon, your proposal shortens defendant's time to file its opposition from 14 days to 7 days (on Friday you said your stipulation would only affect the time within which the reply brief was required to be filed). In addition, I just received your voice-mail message in which you suggested you may want to further modify the briefing schedule. As I indicated on Friday, I need to discuss this proposed stipulation with some other people, but before I can do so I need to know exactly what the proposal is.

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----Original Message---From: Deborah R. Rosenthal (DRR) [mailto:DRosenthal@phhlaw.com]
Sent: Friday, June 01, 2007 7:19 PM
To: Tom French
Subject: Hogge v. John Crane - Proposed Stip re Remand Motion

As we discussed by telephone earlier today, plaintiffs propose that the parties stipulate to having plaintiffs' remand motion heard on shortened time.

Filed 06/07/2007

Pursuant to the Local Rules of the Northern District of California, motions must be filed and served not less than 35 days before the hearing, oppositions not less than 21 days before the hearing, and reply briefs not less than 14 days before the hearing. (See N.D. Cal. Local Rule Nos. 7-2 & 7-3.)

Due to Mr. Hogge's failing health, plaintiffs intend to file their motion for remand no later than Tuesday, June 5, 2007 and to simultaneously move for an order shortening the briefing schedule and the time for the Court to hear the motion as follows:

If plaintiffs file their motion on 6/5, that defendant's opposition be filed and served no later than 6/12 (giving defendant 7 rather than 14 days to oppose); that plaintiffs' reply brief, if any, be filed and served no later than 6/15, and that the motion be heard during the week of 6/18 in accordance with the assigned judge's motion calendar.

Attached is a draft stipulation (and supporting declaration, as required by the local rules) to this effect. Please let me know by noon on Monday whether this is acceptable, or if you have an alternative proposal, or if you are unwilling to stipulate to having plaintiffs' motion for remand heard on shortened time.

Thank you. I look forward to hearing from you.

<< JOHNCRANE stip re OST re remand - DRR dec.doc>> < JOHNCRANE stip re OST re remand.doc>> Deborah R. Rosenthal Attorney (510) 559 9980 Ext. 240 DRosenthal@PHHLaw.com

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